SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

Date Stamp (Received)

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN ENTERED

Date: Permit #: Amount Paid:

Refund:

I (we) declare that this application (including any am (are) responsible for the detail and accuracy may be a result of Bayfield County relying on the above described property at any reasonable time.  Owner(s):				Boo'd for Inguish	- And Case	Municipal Iso			☐ Commercial Use			Residential Use	·		Proposed Use	Floposca collamacions	Existing Structure: (if permit being applied for is relevant to it)  Proposed Construction:		Property	□ Run a		\$ Additi		Value at Time of Completion  * include donated time & material	Non-snoreland	▼.	☐ is Pro	Section $502$ , Tow	1/4,1	PROJECT SE NE LOCATION Legal De	Authorized Agent: (Person Signing	CONTRACTOR	5100 Hokkanen	Klaus Gr	TYPE OF PERMIT REQUESTED—>	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
FAILURE TO OB:  reluding any accompanying ir  nd accuracy of all information relying on this information i relying the time for the purpose	Other: (explain)	-			-	<b>-</b>		Bunkhou					H	☐ Residence	1000000		it being applied fo	- in this section of the section of	тy	☐ Run a Business on	ersion	☐ Addition/Alteration	New Construction	Project		perty/Land withi	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodblain?	, Township T48	1/4 GOVE LOT	SENE IN V.100 Legal Description: (Use T	(Person Signing Application on behalf of Owner(s))	***************************************	men R	). Wied	)—≽   □ LAND USE	TIL ALL PERMITS HA
RE TO OBTAIN A PERMIT or S' mpanying information) has been e information I (we) am (are) providi ormation I (we) am (are) providin the purpose of inspection	xplain)	Conditional Use: (explain)	Special Use: (explain)	Accessory Building Addition/Alteration	Accessory Building (specify)	12	Mobile Home (manufactured date)		with Attached Garage	with (2 <sup>nd</sup> ) Deck	with (2"") Porch	with a Porch		<b>e</b> (i.e. cabin, hunting shack, etc			or is relevant to it)		☐ Foundation	□ No Basement	2-Story		1 3	# of Stories and/or basement		Lake,	River, S	N, Range <u>RO9</u> w	rous	P. 40 324 tatement)			Co. 19	00 5	SAN	VE BEEN ISSUED TO APP
FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES my accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct ary of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering or purpose of inspection.				/Alteration (specify)		y)	date)	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters,	arage				-	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)	Proposed Structure	o e e e	Length: 3				Anna de la companya d	☐ Year Round	1 / ">	t Use		Pond or Flowage If yescontinue	tream (incl. Intermittent)	Town of:	COM A NO. or Lage	dgits) 28 - 21 - 18 -			Lron Ris	5700 Hokkomen Re	□ PRIVY	LICANT.
WITHOUT A PERMIT e best of my (our) know spon by Bayfield Count I (we) consent to count		Talanta in the control of the contro		)	· · · · · · · · · · · · · · · · · · ·			or ☐ cooking &							Ire		2			□ None	<b>υ</b>	,		# of bedrooms	-	Distance Structure	Distance Structure	Tu.	Lous) No.	Pà	Agent Mailing Address (include City/State/Zip):	A CONTRACTOR AND A CONT	Plumber:	746	CONDITIONAL USE	
r WILL RESULT IN PE Jedge and belief it is tru y in determining wheth y officials charged with		1				- Longerty Tables		food prep facilities)								9	Width:	None	☐ Compost Toilet	☐ Portable (w/service contract)	Sanitary (E)	i		Sew Is		ture is from Shoreline :	is from		BIOCK(S) NO.	_	ress (include City/s		2	For Rice		
NALTIES ue, correct a er to issue : n administe					_		  -	s)	_		-	-	_		7				ilet	/service		ary Spo		What I er/Sanii on the j		eline :	Shoreline : feet	Lot Size	SANDABC	Volume Volume	tate/Zip)		184	5	SPECIAL USE	
and complete. I (we) a a permit. I (we) furthe ring county ordinances	×		X	. >	×	×		×		×	<   ×	×	×	10 x 5C	< 🚆		Height:			contract)	Specify Type:	Specify Type:		What Type of Sewer/Sanitary System Is on the property?		□ Yes				ed Document: (i.e. F			7 2k	54847	□ B.O.A	
nd complete. I (we) acknowledge that I (we) permit. I (we) further accept liability which ng county ordinances to have access to the Date										7					Footage		רו				) gallon)	X Well	☐ City	Water		∑ Yes	A	Acreage Occios		Property Ownership) Page(s) 40	Written Authorization Attached Ves No	A La	218-428-4900 Plumber Phone:	715-372-5359	. OTHER	

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

5/00

Hokkeene

Zore

Attach

S 4847 Copy of Tax Statement

urchased the property send your Recorded Deed

Date

•

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

	an ex	-		
	32.200		Feet	Setback to Privy (Portable, Composting)
	3-0-0-1	*	Feet	Setback to <b>Drain Field</b>
/ <i>DD</i> Feet	Setback to Well	<b>t</b>	Feet	Setback to Septic Tank or Holding Tank
Feet	Elevation of <b>Floodplain</b>		Feet	Setback from the <b>East</b> Lot Line
☐ Yes ☐ No	20% Slope Area on property	1	Feet	Setback from the West Lot Line
Feet	Setback from <b>Wetland</b>		Feet	Setback from the <b>South</b> Lot Line
	2**************************************		Feet	Setback from the North Lot Line
Feet	Setback from the Bank or Bluff			
⟨√⟩O Feet	Setback from the River, Stream, Creek	t	Feet	Setback from the Established Right-of-Way
Feet	Setback from the <b>Lake</b> (ordinary high-water mark)	•	Z <sub>C</sub> O Feet	Setback from the Centerline of Platted Road
Measurement	Description		Measurement	Description
			sest point)	(8) Setbacks: (measured to the closest point)

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's exnense.

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be murcher previously surveyed corner or marked by a licensed surveyor at the owner's expense.

ured must be visible from one previ

## 9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: # of bedrooms:	Sanitary Date:
Permit Denied (Daté):	Reason for Denial:	
Permit # 16-0017	Permit Date: 7,27-16	
Is Parcel a Sub-Standard Lot Deed of Record Second Is Parcel in Common Ownership Dees (Fused/Contiguous Lot(s)) Is Structure Non-Conforming Dees	□No Mitigation Required □ Yes □No □ No Mitigation Attached □ Yes □ No □ N	Affidavit Required ☐ Yes ☐ No Affidavit Attached ☐ Yes ☐ No
Granted by Variance (B.O.A.) □ Yes / No Case #:	Previously Granted by Variance (B.O.A.). Case #	7
Was Parcel Legally Created Yes □ No . Was Proposed Building Site Delineated \(\textstyle \textstyle \tex	Were Property Lines Represented by Owner Was Property Surveyed	□Yes □ No □Yes ▼No
Inspection Record:	has mant of during more	Zoning District ( ***) Lakes Classification ( ***)
Date of inspection:	Inspected by:	Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Areaes	Condition(s): Town, Committee on Board Conditions any behad? To Yes J No - (ISNO) they need to be attached 1/2	
D = 0 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Constant the tent to the second	
ART INT OBTHINED IN IN JULY O WELL	4- 245 9 Williams. 1000	THE PROPERTY OF THE PARTY OF TH
Signature of Inspector:		Date of Approval:
Hold For Sanitary: Hold For TBA	Hold For Affidavit:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO TYPE OF PERMIT REQUESTED | | | LAND USE | | SANITARY | | PF 74890 X Non-Shoreland ☐ Shoreland X Residential Use Existing Structure: (if pe Proposed Construction: Authorized Agent: Address of Property: Kristin and Andrew of Completion Value at Time donated time & 繁 Z. PROJECT LOCATION Owner(s): T Authorized Agent: R A Municipal Use 25 (If there are Multiple Commercial Use Proposed Use include narena y be a result of I Recid SUBMIT: COMPLETED AP Section Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138 ECCEPTATION STATE AND PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

For responsible for the detail and accuracy of all information I (we) and (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which we a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the described property at any reasonable time for the purpose of Inspection. Constant 1/4, ୍ଚ for Issua  $\mathcal{C}\mathcal{I}$ - w.H 90 00 ☐ Relocate (existing bldg)
☐ Run a Business on Z ☐ Addition/Alteration (if permit being applied for is relevant to it)  $\hfill\square$  Is Property/Land within 1000 feet of Lake, Pond or Flowage Legal Description: 1 ☐ Is Property/Land within 300 feet of River, Stream (Incl. Interest or Landward side of Floodplain? If yes---contin Property New Construction Owners listed on , Township (If you are signing on behalf of the owner(s) a letter of authorization must IJ 1/4 Project X 🗆 ۹ \_\_\_\_ Grant Other: (explain) Conditional Use: (explain) Special Use: (explain) Residence (i.e. cabin, hunting shack, etc.) 0 Accessory Building Addition/Alteration (specify) Accessory Building Addition/Alteration Wobile Home (manufactured date) **Bunkhouse** w/ ( $\square$  sanitary, or  $\square$  sleeping quarters, or Principal Structure (first structure on property) ھ ت on behalf of Owner(s) (Use Tax Statement) Deed All Owners N, Range 0의 X No Basement
X Foundation and/or basement with a Porch with (2<sup>nd</sup>) Porch with Attached Garage with a Deck with (2<sup>nd</sup>) Deck with Loft Foundation 2-Story 1-Story inversion Basement 1-Story + Loft # of Stories BAYFIELD CEUMTE WISCONSIN (specify) P 04-638-2-48-0 APPLICANT. Brule, WI 4mH0) 018HE sign or letter(s) of authorization Second ٤ Agent Phone: City/State/Zip: APPLICATION FOR PERMIT If yes-If yes---continue **Proposed Structure** Length: Bayfield Co. Zoning Dept. Length: -continue Year Round f100% Seasonal JUL 77 2016 PRIVY ٤ Q Use Dulu ĸ ittent) 등 ₩ 20 6-80-60 Plumber: = Agent Mailing Address (include City/State/Zip): in Josh CONDITIONAL USE
City/State/Zip Distance Structure is from Shoreline: Distance Structure is from Shoreline: 06.8 bedrooms accompany must accompany this application) None WN cooking & food prep facilities) of, Lot(s) No. # Shape Brule, WI 02-000-10000 Width: Sanitary (Exists)
Privy (Pit) or Municipal/City (New) Sanitary Attach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed Block(s) No. Portable (w/service contract) Compost Toilet ☐ SPECIAL USE bsidence Sewer/Sanitary System Date: Permit #: Refund: ယ Amount Paid SHOULD Is on the property? Recorded Document: (i.e. Property O What Type of Volume Lot Size Subdivision: 10 feet Specify Type: Specify Type: \_\_\_\_\_\_\_
Vaulted (min 200 gallon) 304× Date Dimensions ls Property in Floodplain Zone? B.O.A. 

OTHER

Telephone: ><  $\times$ × ×  $\times$ No SCH けつけ Height: Height: THIN DITH 4 6 7-28-16 96-26 Attached Plumber Phone Cell Phone: Written Authorization Acreage  $^{\circ}$ 2226 Į, 000 몽 Are Wetlands Footage +7 2 2 Square Present? Ownership) -X Well 3969 0 Water 9

Address to send permit

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Brule,

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54820

( = )			
<ul> <li>(2) Show / Indicate:</li> <li>(3) Show Location of (*):</li> <li>(4) Show:</li> <li>(5) Show:</li> <li>(6) Show any (*):</li> <li>(7) Show any (*):</li> </ul>	North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%	ontage Road) I <b>d (</b> DF); (*) <b>Holding Tank</b> (HT) and/or <b>nd</b>	(*) Privy (P)
Hury neighbor's	or's help treed	ection. Pudes Rd	Z
Drive way Thanks	The same thank	Merchour's	
Strain Strain	to convert to a home.		
	nuaktur's land		
Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)	(7) above (prior to continuing) ks: (measured to the closest point)	Changes in plans must be approved	red by the Planning & Zoning Dept.
Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	375 Feet Feet	Setback from the Lake (ordinary high-water n Setback from the River, Stream, Creek Setback from the Bank or Bluff	mark) $\mathcal{N}A$ Feet $\mathcal{N}A$ Feet $\mathcal{N}A$ Feet
Setback from the North Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	400FeetSetback350Feet20% Sioඉ00FeetElevatio	Setback from Wetland 20% Slope Area on property Elevation of Floodplain	//A Feet □ Yes □ No Feet
Setback to Septic Tank or (Holding Tank Setback to Drain Field Setback to Privy (Portable, Composting)	25 Feet Setback to  NA Feet  75 Feet	to Well	ahui 25 Feet
Prior to the placement or construction of a structure within ten (10) feet of the minin other previously surveyed corner or marked by a licensed surveyor at the owner's experience to the placement or construction of a structure more than ten (10) feet but less one previously surveyed corner, or the other previously surveyed corner, or the other previously surveyed corner, or the other previously surveyed corner.	num required s bense. than thirty (30 by the Departs	om which the setback must be measured must be visi quired setback, the boundary line from which the set ompass from a known corner within 500 feet of the p	ble from one previously surveyed corner to the pack must be measured must be visible from proposed site of the structure, or must be
(9) Stake or Mark Propu NOTICE: All L For The Construction	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DE), Holding Tank (HT), Pri NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwellin The local Town, Village, City, State or Federal agencies may also require permits.	(ST), Drain field (DF), Holding Tank (It issuance if Construction or Use has not as Are Required To Enforce The Uniform cies may also require permits.	<u>4T), Privy (P),</u> and <u>Well (</u> W). begun. Dwelling Code.
Issuance Information (County Use Only) Permit Denied (Date):	Only) Sanitary Number: 6 - 5 2	# of bedrooms:	Sanitary Date:
_0	rmit Date:		
ot   🗆 Yes	(Deed of Record)	□ Yes UNO	Affidavit Attached
Granted by Variance (B.O.A.)  U Yes No Case #:	Previously	Previously Granted by Variance (B.O.A.)  Case #:	
Was Parcel Legally Created Was Proposed Building Site Delineated	Nes 🗆 No Were Pro	Were Property Lines Represented by Owner - Was Property Surveyed	Yes ONO
•	represent project + &	thock	Lakes Classification ( Harry)  Date of Re-Inspection:
Committee	s □ No -(If No they	be attached.)	+ complied
with Habitation	Howel in of	Stern !	med abhares
Signature of Inspector: Hold For Sanitary: Hold For Sanitary:	Hold For TBA:	Hold For Fees: ☐	Daniel J. Approval: